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[NO. 4.]

To the Editor of the Boston Medical and Surgical Journal.

SIR,—If you think the following worthy of an insertion in your valuable medical periodical, it is at your service and disposal.

CHIMAPHILA UMBELLATA.

It is presumed that this is a vegetable but little used by physicians, or at least not so extensively as it would be were they better acquainted with its remedial properties as a domestic medicinal agent.

Synon. *Chimaphila umbellata*, Pursh; *Pyrola umbellata*, Lin. Popular names are Bitter Wintergreen, Princes' Pine, Pipsisewa, &c.

B. C. "Stem semi-procumbent, hard and woody, upper part reddish, from six to eight inches high; leaves generally whorled-like, and two whorls on each stem, sometimes alternate and irregularly situated, lanceolate, ovate, deeply dentate, of a shining green color; scape corymbiform; calix small, five parted, persistent; flowers greenish-white, tinged with red; corolla consisting of five roundish concave and spreading petals; anthers purple; germ globular; stigma thick and sessile; style persistent; capsule roundish, five angled, containing numerous and chaffy seeds." Edwards and V.

As an indigenous remedy it has long been in popular use in this section of the country, under the guidance of females, and to a certain extent well deserves the high reputation bestowed upon it by them. Its taste is bitter, combined with some astringency and aroma, and an analysis by Dr. Mitchel afforded tannin, gum and resin.

I have found the *Chimaphila* to be an article of great value, especially as an auxiliary in various chronic affections, originating from and dependent upon debility; and is nearly related in its remedial properties, as well as its botanical affinity, to the *Arbutus uva ursi*. It possesses the properties of a mild tonic, and, in addition, is diuretic, diaphoretic and slightly deobstruent.

As a *tonic* I have found it particularly useful in chronic affections of the digestive organs, and nearly allied to the preparations of iron, more so than any other vegetable with which I am acquainted; as, like them, its tonic property is spent *primarily* upon the digestive organs, and affects *secondarily* the circulatory and nervous system. It is likewise a good auxiliary to other remedies in that variety of paramenia obstructionis dependent upon debility, but more especially where it is connected with a deranged state of the hepatic secretion, and which involves to a greater or less extent the digestive apparatus. I have used it in two cases of

this kind, one of them of nearly two years standing, and for which several eminent physicians had prescribed to no purpose; and I think I can safely say I should not have been successful without it.

As a *diuretic* it is of considerable value as a palliative in calculous affections—particularly in the variety *arenosa* and *calculosa* of *lithia renalis*; and I think it fully equal, if not superior, to any other indigenous vegetable with which I am acquainted—indeed fully equal to the *Arbutus uva ursi*.

As a *diaphoretic*, *deobstruent*, *diuretic* and *tonic*, considerable benefit has been obtained from it in *anasarca*, *hydrothorax*, *arthritis rheumatismus* and *phthisis strumosa*.

The form in which I have used it, is that of an infusion, as the following:

R. The whole plant, ʒvj. Water, lbj. Dose from fʒj. to fʒiij. once in 3, 4, or 6 hours, according to circumstances.

PUERPERAL PERITONITIS.

I was very much pleased to notice in your paper of January 20, some remarks from Dr. Palmer upon puerperal peritonitis as it occurs in subjects "entirely unconnected with child-bearing." It has been my lot to have "a personal encounter" with three cases of it, as described by Dr. P., within the past year. The first occurred in a young Boy,* aged eleven years, and the case was treated with external irritants, as blisters, epispastics, &c. to the seat of the affection, anodyne and cathartic injections, deobstruents and mucilages, and, to say all in one word, a vigorous course of medication was pursued upon the above-mentioned principles; but notwithstanding, the case terminated fatally in about sixty-three hours. Leave could not be obtained for post-mortem examination; for could this have been done, the case would have been reported, and all the details fully given. The second case occurred in a young female aged nineteen years, and which was treated upon the same principles; and after the lapse of twenty-three days, she became convalescent. The third was a female, aged sixteen years, and was treated in the same manner; and which terminated fatally within about four weeks from the attack. It is to be remarked that a resort to venesection was not deemed prudent (as the pulse was extremely frequent, small, wirey, and occasionally intermitting with great muscular debility—indeed the assuming an erect or sitting posture in bed would immediately produce faintness), except in the last case, in which it was practised but once, and which was the first thing done, and this with marked disadvantage to my patient—so much so, that I did not dare to repeat it. The amount of blood taken was about sixteen ounces, and which evidently aggravated every symptom present.

I make these remarks merely because it is stated by Dr. P. "*that the lancet should be fearlessly employed at the commencement.*" I am satis-

* It is to be observed that although the term "Puerperal" is attached to this disease, it is not wholly confined to the female sex. For the case occurring in the boy above-mentioned, was ushered in with the same symptoms, precisely, differing in no respect, only in degree, and passing more rapidly to a fatal termination.

fied that had this been practised in my cases, it would have proved hazardous. I do not wish to be understood here, as contradicting Dr. P.—no, not at all. “Circumstances always govern cases.” His cases might have occurred under different circumstances from mine, and still have been the same disease—perhaps the diathesis was different. If he has given a correct description of his cases, they must have corresponded with mine, or, at least, sufficiently so to pass for the same disease. He is probably aware, and so must every one be, that one disease never occurs alike in different subjects.

THOMAS GLYSSON, M.D.

Newport, Vt. February 11th, 1836.

DEATH BY LOBELIA.

To the Editor of the Boston Medical and Surgical Journal.

DEAR SIR,—I send you an account of a case that fell under my notice a short time since.

On Sunday morning, August 9th, 1835, at 5 o'clock, I was called to see Mr. M. who was said to be laboring under cholera. When I arrived, I found him in the hands of a *Quack*, who had been with him some time. I made inquiries what had been done, but could not then learn. I examined the patient, and found him with a pulse 70, small, tongue slightly furred, thirst urgent, diarrhœa severe (stools passing involuntarily), coldness of the extremities, with spasm of the inferior, no vomiting, no spasms of the abdominal muscles, and no delirium. I was requested to do something by the friends, and gave him a grain of Morphine, with one-eighth of the Dichlorate of mercury, and in thirty minutes repeated half the Morphine; to be continued at regular intervals, with frictions and warmth to the extremities. Under this he seemed to improve a little for a while, but it was temporary, as he soon became worse. A neighboring physician was called, who thought with me that the course I had pursued was the one indicated. We therefore continued the former treatment, viz. Morphine and Mercury, with frictions, &c. The spasms again subsided, and the patient became comatose, in which state he continued until about 7 o'clock, P. M. when death closed the scene, eighteen hours from the attack.

What to me appeared remarkable, was the pulse, which continued to range from seventy to one hundred and ten, until a short time before his death, and the want of action of the stomach, and an irritability so common in cases of diarrhœa. Since the death of Mr. M. I have learned that he was taken with diarrhœa, attended with no vomiting, and that he took but little until the *Quack* came in, who gave a “double dose” of Capsicum and Lobelia, which caused a little vomiting once, when immediately the spasms and coldness of the extremities became severe, and the stools involuntary, which was the cause of my being called.

I considered the case at first, one of what is called by many “cholera morbus,” little thinking that he had taken over doses of Capsicum and Lobelia. My opinion now is, that he fell a victim to Lobelia, as well as many others in these parts. I would, however, ask, whether Lobelia

could produce similar symptoms, and thus cause death ; or was the result of the case owing to the anodyne treatment, as is asserted by some ?

Yours, &c.

J. R. BROWN, M.D.

Oswego Co. N. Y. January 28, 1836.

EFFECTS OF ANIMAL MAGNETISM.

To the Editor of the Boston Medical and Surgical Journal.

SIR,—Perceiving in your late numbers some articles on *Animal Magnetism*, a subject, which, notwithstanding its interest and importance to the medical world, is for the first time seriously agitated in this community, I take the liberty of sending you a few remarks upon it, the result of my individual experience.

I do not expect that the facts I relate will be believed by all, on *any* authority ; but it is fortunate for my reputation that the witnesses of some of them are men who cannot be suspected of deceiving, or being deceived.

It is about two years since I thought seriously on what you so justly term this “unfathomable science.” Indeed, I first heard anything like a correct account of it, while attending medical lectures at Dartmouth College, and though at the time I laughed with others at its miraculous impossibilities, I could not escape an internal conviction that I possessed the power in question ; yet I have not, until quite recently, verified the truth of this conviction by actual experiment.

Some of my first attempts were upon M. Poyen himself, who has for many years suffered from disease of the digestive organs, which deprives him of the power of operating. I have never failed of relieving the pain to which he is subject, and promoting his digestion ; inducing, however, nothing approaching nearer to a magnetic sleep than drowsiness and yawning.

My next subject was a girl in perfect health, on whom I operated but once, producing a slight headache, stupor, coldness of the extremities, small pulse, with a singularly wild expression of countenance, which showed itself particularly when recovering from the partial insensibility into which I had thrown her.

My first experiment in this city, was upon a young man of my acquaintance, who was sitting in my office one evening, when the subject of magnetism was mentioned, and who inquired of me in regard to it, as he was entirely ignorant concerning it. I asked him to sit quite still, and I would show him. He did so. In about five minutes he started up and exclaimed, “Stop!—what are you doing to me? I shall go to sleep. I never felt so strangely in my life!” I quieted his apprehensions by telling him that no harm should result, and he again seated himself. In ten minutes more he was in a sound sleep. At this juncture M. Poyen entered, and after allowing him to sleep a few moments I awakened him. He described his sensations as the most singularly agreeable it is possible to conceive, and used an expression common with magnetized persons, that “he felt as if going to heaven.” During the operation he once complained that I was pricking him in the region of his stomach ; I but

pointed my fingers towards that part of the body, which he could not have perceived, as his eyes were closed. During his sleep he was deprived of speech and motion. He said he heard M. Poyen enter, and tried to speak three times, but was unable to articulate a syllable.

In a subsequent operation upon the same patient, he conversed readily with me, but could hear no other person, though they spoke much louder.

This young man is about twenty, spare figure, of a nervous lymphatic temperament, and enjoys good health. He may be seen, and conversed with, by applying at my office.

I will trouble you with but one other case, which is far more remarkable than any of these, and the success of which gives me the highest confidence in my power over pain and disease. The operation I refer to was upon a young woman at the House of Industry, South Boston, and was witnessed by Dr. Perry, the physician of that establishment, and eight or ten of his students; by Mr. Simonds, the overseer, and several other individuals.

I found the patient in the corner of a room in the female ward, affected with an acute disease of the heart, accompanied by hysteria. Not a word was said to her, in regard to the experiment to be performed. She was seated in a chair, and desired to be quiet. I sat down before her, and in eight minutes she exhibited symptoms of drowsiness, and expressed the strongest dissatisfaction at the prospect of going to sleep in her chair. I continued the action a few minutes longer, when her eyes closed, notwithstanding her evident exertions to the contrary, and her head dropped upon her shoulder. Suddenly she started with an expression of pain, and put her hand to her side. Hitherto I had only exerted myself to produce an effect which should satisfy the spectators, and had not acted at all upon the seat of disease. I then directed my action to the region of the heart, and in a moment the pain was wholly relieved and she was in a quiet slumber. This was accompanied by a state resembling somnambulism, in which she answered all my questions, said she was free from pain, and that she had not slept so for six months. I left her in this situation, and have since been informed that *she slept for forty-eight hours!*

It was agreed upon all hands that the experiment was a perfectly fair one, and that not one of those extraordinary phenomena could have been produced by any influence on the imagination.

I cannot describe the power by which I produced such effects. Nothing is applied to the patients internally or externally; I do not even require to touch them. Animal Magnetism is the name given to it, which is perhaps as good as any other, but does not in the least explain it. It is very like magic, but it is a kind of magic of which I sincerely wish that every one affected with pain and disease may reap the benefit.

I desire nothing more strongly, than that a delegation of the medical faculty may witness the singular effects of this extraordinary power, and that arrangements be made for applying it extensively to the advancement of a profession in which I feel deeply interested.

I remain, sir, with the highest esteem, yours, &c.

Standard Office, Feb. 8, 1836.

THOS. L. NICHOLS.

A SINGULAR CASE OF WORMS.

To the Editor of the Boston Medical and Surgical Journal.

SIR,—I send you the following details of a case, which has been quite interesting to me, for publication in your useful Journal, if you deem them worthy of an insertion.

On the 27th ult. I was called to prescribe for Oliver Hale, a lad about nine years old, of *slender* form, rather emaciated than otherwise, *nervous* temperament, and strumous habit. He never had been very healthy, but from infancy had been subject to frequent paroxysms of asthma, which would recur on a very little over exertion or mental excitement. He had vomited the night and forenoon, previous to my arrival, several times, and when I arrived he complained of headache and nausea, his pulse was small, very frequent (160 in a minute) and wirey, his tongue covered with a thin whitish fur, and his breath exhaled an intolerable fetor. I gave him some ammoniated paregoric, which immediately relieved him of the nausea and headache; and he slept most of the afternoon and evening, but on going to bed he complained of a slight headache.

On the 28th, I found him lying upon his back, unable to articulate, to see, or to hear; his limbs were continually in motion, but the motions no doubt were involuntary, perfectly resembling those of chorea sancti viti. The left eye was wide open, and wholly insensible to the light, and incapable of motion, though there was a continual oscillation of the iris; the right eye was spasmodically closed. His mouth, on putting a little liquid into it so as to excite the organs of deglutition, was contorted to the right, while the opposite side was perfectly motionless. Indeed the whole nervous system appeared to have sustained a lesion which could not have been produced by any slight cause—the whole was nearly paralyzed. His breathing was natural; tongue and teeth at this time were covered with sordes; skin dry and cool; secretion of urine entirely suspended; fæces very scanty, and discharged involuntarily; testicles retracted; pulse very frequent, and scarcely perceptible. He was evidently at death's door, and continued, as above described, until the evening of the 31st, when he expired.

The most powerful cathartics and anthelmintics were administered, but no evacuation was procured; calomel, the oil of pine, and the oil of tigllium, were alike ineffectual. One or two scanty stools were procured by enemata; and two lumbrici were discharged per anum, and one was ejected by vomiting. He was seen by two other physicians, but it was difficult to determine whether the idiopathic affection was in the brain, or in the intestines, or neither.

Autopsy.—Leave was obtained to examine the body, and the following was the appearance of the abdominal and thoracic viscera. The heart and lungs were perfectly healthy. The liver was rather larger than usual at that age; the gallbladder was distended with gall; the stomach was filled with a slimy porraceous-looking fluid, which was highly charged with that peculiar fetor which had been observed from the first, and which was undoubtedly the same fluid as that which he had vomited

at the commencement of the disease. The spleen was twice as large as the natural size, and of a grey or ash color; the kidneys of a very light color externally, and grumous internally; the bladder was contracted to as small a compass as possible, and entirely empty, the parietes of it being nearly or quite half an inch in thickness—in fact, its cavity was quite obliterated. The alimentary canal was nearly empty of fecal matter. Large knots of worms (*lumbrici*) were found in the rectum, sigmoid flexure, cœcum, and in the ascending portion of the colon. From the sigmoid flexure there was a stricture of the colon, six or eight inches in length, occupying the whole of the arch, where the size of the gut was not much larger than a good-sized goose quill. A little further on towards the cœcum was an intussusception of about four inches, which would probably have extended farther, had not the stricture prevented the descent of the gut. The intestines exhibited very prominent marks of inflammation and gangrene, and more perfectly where the knots or bunches of worms were found; there were six of these large knots or bunches, containing from fifteen to twenty worms each, and some uncommonly large; and they were scattered singly through the whole course of the alimentary canal. There were probably from one hundred and twenty to one hundred and thirty worms.

Want of time prevented an examination of the brain. What the appearance of it would have been, I cannot say; but I found enough in the abdomen to convince me that nothing but a miracle could have saved the patient.

C. SPENCER, M.D.

Clarendon, Vt. Feb. 1st, 1836.

W*. W*. AND MR. GRAHAM.

To the Editor of the Boston Medical and Surgical Journal.

SIR,—The wise man says—"Answer not a fool according to his folly, lest thou also be like unto him"; and then he immediately adds—"Answer a fool according to his folly, lest he be wise in his own conceit." At first view, there appears to be a flat contradiction in these two propositions; but more careful attention to their import shows them to be strictly consistent with each other, and with what is right and proper in the nature of things: and I suppose a good illustration of the practical bearing of the two precepts would be this—Answer not W*. W*. in his own low, scurrilous and dishonest manner, of personal abuse and slander and falsehood, for by so doing you would make yourself a fool like him; but sternly expose his ignorance and impertinent conceit, lest he be wise in his own opinion.

But, Mr. Editor, there is the strongest internal evidence, in the communication of your correspondent W*. W*. that on the subject which he officiously meddles with, he is both too ignorant and too dishonest to be easily convinced of his folly. What ought to be thought of an individual who, without ever having seen Mr. Graham—without ever having heard him lecture—has the cowardly impudence, in an anonymous manner, to parade his opinions concerning the lecturer and his lectures and hearers,

before the public, as if he was familiarly acquainted with all, and competent to judge of their merits. Mr. Graham has had for his hearers many of the most intelligent and scientific people in New England, and yet this impudent fellow talks of their ignorance with the flippancy of a fool. The prevailing and almost the only complaint against Mr. Graham's lectures in Boston, has been that they are too severely scientific and abstruse. You, Mr. Editor, know that no less eminent an individual than Dr. John C. Warren, has declared; Mr. G.'s lectures too scientific for a popular audience, and yet your impudent correspondent, in utter ignorance, but with a pretension to knowledge (which in a moral point of view amounts to downright and wilful falsehood), asserts that Mr. G. produces his effect on his ignorant audience by mere declamation and assurance; and with the most unbounded effrontery pronounces Mr. G. an ignorant and rank empiric, in direct contradiction to the testimony of all intelligent people who have in any place attended his lectures. I say, therefore, that any creature who is so deeply dishonest and depraved as to be guilty of such conduct, is not easily to be convinced of his folly. Look at his contemptible misrepresentations of Mr. G.'s reasonings concerning *tea*. Everybody that ever heard Mr. Graham lecture knows this stuff to be a tissue of falsehood. Not an argument which he has put into Mr. G.'s mouth was ever used by him. He never reasons from his own personal experience, nor from the personal experience of any individual, to show that *tea* is a poison, nor that anything else is pernicious; but his reasonings are all founded on the general, and fully ascertained and admitted principles of science. He has no Procrustean bed, and none but an ignorant or a base creature would accuse him of it.

But the whole article of your correspondent is too much the raving of a presumptuous fool to deserve particular notice. What can be hoped of one who is so ignorant as to make the statements that he does concerning *tea* and *coffee*, in the very face of the most complete scientific demonstrations made by a number of distinguished professional gentlemen of Europe? "To the mass of mankind," says he, "they are a most agreeable and salutary stimulus." Unpardonable ignorance for one who pretends to belong to the medical profession! A painful evidence this, of the truth of a declaration made a few days since by an eminent physician in advanced life. "There is as much quackery in the profession," said he, sternly, "as there is out of it!" I hope he was mistaken, but his learning, his age, and his experience, greatly qualified him to judge rightly.

Let those flippant idlers who swarm the medical profession merely for the sake of getting a living without labor, apply what talents they possess to the acquisition of scientific knowledge, with becoming diligence and perseverance, and they will soon learn enough of their own ignorance, at least, to know when it is better for them to be silent than to speak. They see the oldest and most respectable members of their profession—men distinguished for their learning and experience and skill—calmly and decidedly supporting the principles advocated by Mr. Graham; and yet with all the assurance and self-conceit of green Sophomores they "*blur*t" out their denunciations against him, even when they know no-

thing of him. But while they are ignorant they will rave, and especially at everything which has a tendency to disturb their indolent security, and make it necessary for them to become better informed in order to maintain any professional standing in society.

If your correspondent W*. W*. has any moral sensibility about him, let him blush at his own dishonesty and hardened effrontery in attacking in such a cowardly manner one whose character and performances he knows nothing of,—and by so doing making himself virtually guilty before the public, of shameless calumny and barefaced falsehood. Seriously, Mr. Editor, what ought the community—with whom sacredness of personal character is the very palladium of social peace and prosperity—to think of that individual who thus presumes to assassinate, in public, the character of one of whom he is entirely ignorant, and who either knows himself to be utterly ignorant of what Mr. G. really does teach, or wilfully and basely asserts that which he knows to be false ! R.

February 18, 1836.

CASES IN PATHOLOGICAL ANATOMY.

BY LUTHER V. BELL, M.D.

[Communicated for the Boston Medical and Surgical Journal.—Continued from p. 408.]

VII.—ALBINOID CHILDREN.—Whilst employed in an epidemic smallpox at Candia, N. H. last March, I was called to examine a supposed case at the house of Mr. John Roberts. When there, my attention was attracted to several of his children by the peculiar milk-whiteness of their hair. On further examination, the eyes of three were found of that peculiar character, described in the works on physiology as appertaining to the *albino*. The iris was of a pale, bluish tint, very slightly colored ; the opening in it, or pupil, in one presented an intense, beautiful and sparkling ruby-red color ; in a second a rose tinge, and in the third an intermediate shade, no less marked and beautiful ; and in all the eyes were also in a continual vibratory or oscillatory motion. The whole three were more or less myopic, and were afflicted with that peculiar sensitiveness to light, said to pertain to the albino, as I noticed that when they turned their vision towards the window, the organs were guarded instinctively by the application of the hand. Those who lived in the vicinity and were acquainted with their habits, united in saying that they had a wonderful power of seeing in a great degree of darkness. The hair of the eye-brows and eye-lashes was of the same dead, snow-white color as that of the head ; their complexions were not manifestly different from that of other children well browned in the sun. Their intellectual faculties were about upon an average of development, rather below than above mediocrity, I should think from report. Their ages were about eight, five and two respectively, other children having been born of the same parents before, intermediate, and one after these three, which had none of these peculiarities. These parents were healthy people, natives of the vicinity, nor had any of their ancestors been thus distinguished. The

children were also healthy and sprightly; their appearance and expression was peculiarly striking and unnatural, beyond what would have been anticipated from such a deviation from natural structure.

For the benefit of any of the readers of this Journal, who may be passing near the vicinity, I would remark that they yet reside about two miles south-east from Candia corner.

On turning to the books of physiology for an elucidation of these *lusus naturæ*, it will be seen that according to their definitions these cases are not properly albinos, but certainly approximate closely enough to deserve the appellation of *albinoid*. "On donne ce nom" [albino], remarks Renaudin,* "aux hommes de certains climats chauds, dont la peau, au lieu d'être fortement colorée, ne présente sur toute la surface du corps qu'une teinte pâle, d'un blanc mat assez désagréable à la vue. La singularité de ce phénomène consiste en ce que ces individus sont nés des parens du couleur cuivrée ou noire." As the climate, the skin and the color of the parents do not correspond to this definition, these cases evidently do not fall under the *nègres blancs* or *blafards* of the French.

Renaudin further observes that naturalists are divided in opinion whether the albinos form a variety of the human species entirely accidental, or whether their peculiarities are the results of a morbid state of the system. M. Hallé thinks that the change is referable to the coloring matter of the skin of the negro, but that it does not constitute actual disease. Blumenbach regards it as a true cachexy. Sprengel embraces this view, but considers that the cases observed in certain northern latitudes, differ from those of the warm climates, adding, that in the former this cachexy has a great analogy to the white leprosy, described or spoken of by Moses, which is becoming every day more rare.

In the instances I have described, I apprehend that no suspicion of any existing morbid action or "dégénérescence" will be entertained by any one, as the affection or peculiarity was congenital. It would seem to be only an original deficiency of that secretory organization of the villous coat of the choroid membrane of the eye, which produces the pigmentum nigrum, and also that apparatus, ever connected with this, which forms the coloring matter of the hair. The lurid redness of the pupil doubtless is occasioned by the blood circulating in the vessels of the choroides, reflected from the bottom of the eye.

VIII.—*Scirrhus stomach*.—I was invited to assist in the post-mortem examination of Mr. Jona. Dearborn, of Chester, N. H. He had been suffering several months under some complaints supposed to be of the stomach, although the conjectures of the physicians who saw him were somewhat discordant and indefinite. He suffered much pain, greatly aggravated by pressure in the epigastric region, was unable to retain anything on his stomach without vomiting, and was, I believe (for I did not see him during life), finally worn out by the irritation.

Autopsy.—Body excessively emaciated; skin of that sallow, waxy hue indicative of cancerous affection. On opening the abdominal parietes the stomach and adjacent parts presented one general, confused, and

* Dictionnaire des Sciences Med. tome I.

horrible mass of disease. On dissecting out this organ from its adhesions on every side, it was found to be throughout affected with scirrhus, partly in a state of cartilaginous hardening, and partly tattered by ulceration. The cavity of the viscus was so contracted by disease that an ordinary sized quill could not be passed through it, at its narrowest point. The left lobe of the liver where it was in contact with the stomach was in a state of unhealthy hardening, and contained also a large abscess filled with pus. The omentum, peritoneum, mesentery, &c. were studded over by hundreds of tubercles of cartilaginous consistence and size, varying from that of a pea to nearly an inch in diameter. The lungs were found without a single tubercle or vestige of disease.

The pathological consideration which prominently presented itself to my mind in reflecting on this case, was the fact that vomiting should have existed when the entire parietes of the stomach were degenerated into a scirrhus mass, presenting no resemblance to their ordinary coats. If their function was thus destroyed, we can explain the act of vomiting only by the action of the abdominal muscles, exclusively, in the same manner as it was produced by Magendie in his well known experiment of removing the stomach of an animal, and replacing it with a bladder tied to the œsophagus. An emetic substance injected into the veins produced the evacuation of the contents of the bladder, of course solely through the efforts of the abdominal muscles.

IX.—*Death from umbilical hæmorrhage.*—A child of Mr. B. K., of this place, about forty-eight hours after birth, was noticed to assume a golden yellow tinge over the surface of the entire skin. This yielded after a few days, in a great degree, to the employment of mercurials. When about sixteen or seventeen days old, a bleeding commenced from the umbilicus; from which the remains of the funis had separated in the usual manner a week or more previous. Dr. Farrar, of this town, in whose practice the case occurred, attempted to check the hæmorrhage by the application of various astringents, styptics and pressure, but without success. On being called, after the child was much exhausted, I tried to accomplish the end by escharotics, and finally by the application of the actual cautery. These measures were alike successful for a short period, but the action of the abdominal muscles, as soon as the child began to cry, tore apart the eschar and the hæmorrhage re-commenced. As a last resort I covered the part with a circular plaister of the most adhesive kind, perfectly applied and extending an inch or two on each side;—the current of blood acting doubtless on the hydrostatic principle that the pressure of a column of fluid is in proportion to its base and height, soon burst through the adhesion. Making another attempt at controlling the effusion by a hard, round compress bound around the body, it seemed to succeed; but on looking at the infant, it had ceased to breathe.

I examined the case the next morning; for this hæmorrhage had occurred *in the night*, rendering any attempt to take up the artery impossible. The umbilical arteries were both found pervious throughout, as was also the vein. No morbid peculiarities of structure were found to account for the jaundiced aspect, the excretory ducts being unobstructed.

In the XI. Vol. of this Journal, p. 179, a case of this kind is detailed from the practice of Sir A. Cooper; in which it is stated that the arteries were "so much retracted within the integuments, that it must have been impossible to have stopped the hæmorrhage by pressure." In the case of Dr. F.'s the arteries seemed, as far as could be judged from appearances, before the parts were disorganized by the cauterization, to terminate in a spongy surface, from which the blood exuded generally.

X.—*Peculiar omental adhesion.*—Mr. J. J., a respectable citizen, had suffered under an omental femoral hernia for fourteen years. It was protruded about the size of an egg, and irreducible. In Oct. last, on lifting a heavy weight, an additional portion (which proved to be intestine), descended; this could not be returned, and I performed the operation for relieving the stricture. Gangrene had occurred, and he succumbed in the course of a few days. On examination, after death, the omentum was found firmly adherent to the hernial sac, and drawn so tight that considerable tension must always have been made upon the stomach, especially when that organ was distended. I could not, however, learn that any symptoms indicative of irritation from this cause had been noticed during the number of years this unnatural state must have existed, as was evident from the fully organized fibres forming the union of the parts.

February 19, 1836.

PHTHISIS PULMONALIS CURED BY SUPERVENING MANIA.

To the Editor of the Boston Medical and Surgical Journal.

SIR,—A case of the above kind fell under my care a few years since, so marked in its diagnosis, that a brief description of it, I have thought, might not be unworthy a place in your valuable Journal.

Miss L. M., aged about 26, was attacked with influenza in 1827, which prevailed extensively where she then resided (in the western part of the State of New York). When she came to this town (to reside with a friend), where I first saw her, she had a severe cough, purulent expectorations, quick pulse, periodical chills, night sweats, great emaciation, &c. &c. In short, I have rarely if ever met with a case, in the course of more than 20 years practice, which exhibited the usual diagnostic symptoms of confirmed phthisis more clearly than this. She was subject to severe attacks of dyspnœa, several of which it was supposed she could not survive, and while friends and neighbors were expecting that "every day would be her last," she was suddenly seized with raving mania, requiring constant watching to prevent her destroying herself by violence. Reduced to a mere skeleton, and in a state of almost helpless exhaustion as she was, it was astonishing to witness the sudden transition to such a degree of muscular vigor as to require the strength of men to keep her from dashing through her chamber windows, and other attempts at self-destruction. Immediately upon this attack, her cough and expectoration began to abate, and in a few weeks had entirely subsided, and has never returned, although about eight years have now elapsed since she was

considered to be in the last stages of consumption, which had then been of about a year's standing.

Soon after this change, she went to other friends in a remote part of the country, and I have not since seen her, but frequently hear through her relations that her health remains tolerably good, with the exception that her mental faculties have never been fully restored.

The only remark that I will add, is, that this case seems clearly to come within the well-known pathological law in relation to the *diversion* or *transition* of morbid affection, or functional derangement; and if this secondary attack had been much less violent, or of short duration, it would have merely mitigated, or suspended the former symptoms, as pregnancy often does; and on subsiding, the original disease would have returned with increased severity and quickly terminated the patient's life, an event which I did for a long time anticipate, that is, the recovery of her reason and the return of her former complaint,—but she has remained many years, as I before observed, entirely free from pulmonary affections.

A. G. DANA.

Pittsford, Vt. February, 1836.

BOSTON MEDICAL AND SURGICAL JOURNAL.

BOSTON, MARCH 2, 1836.

MEDICAL COLLEGE OF OHIO.

HAVING received a report of the trustees of this institution to the General Assembly of the State, we have given it an examination, and feel satisfied that the present course of instruction is of an elevated character. Very few of the old schools manifest such decided energy as now characterizes the Medical College of Ohio, in its regenerated form. There are six professors. One hundred and twenty-seven students were matriculated at the commencement of the lecture-term—a larger number than has been brought together in Cincinnati for a considerable time, and only four less than the largest class ever known in that city. The anatomical cabinet is valued at 3000 dollars, which cannot, therefore, be considered inferior. Anatomical demonstrations are given daily, and the dissecting rooms are represented to be furnished with all the necessary conveniences. Nothing is more essential to the permanent usefulness of a school of medicine, than a thorough devotion, on the part of managers, to furnishing the means of learning anatomy. Whenever that department is neglected, the entire establishment invariably begins to wane, however energetically may have been displayed the talents and conservatory exertions of an otherwise industrious faculty. From a schedule of the apparatus belonging to another chair, we are impressed with a belief that a valuable course of instruction is given in chemistry. It is stated that the experiments have averaged twelve, at each lecture, which evidently shows that a more brilliant system is taught than is always exhibited in New England. A neglect is apparent, of late, in some of the sea-board colleges, in regard to chemical philosophy. It is so much easier to read, from day

to day, the ten thousand times repeated views of Sir Humphrey Davy, on this thing and that, which instead of exciting the hearer to investigate the laws of nature for himself, only act like a dose of opium, in lulling him into a sweet repose, that we fear this mode is sometimes adopted. If there can be nothing decidedly new presented, there should be such striking illustrations of known facts, that the science may not eventually fall into utter disrepute.

Beside various other topics adverted to in the report, of consequence only to the legislature, to show the good condition of the property, its value, and the future prospects of the college, there are details of another kind, which medical men will read with satisfaction. The library, though not large, is choice, and seems to have been selected with a degree of judgment that reflects honor upon those who controlled the purchases. Lastly, having already said more than was intended when the pamphlet came to hand, we cannot finish these hasty observations without remarking, that, from all appearances, the Medical College of Ohio is destined to become a great central school of the West. Its financial concerns are embodied in the following paragraph, from the treasurer's report, made in obedience to a resolution of the Board of Trustees, in October.

"The amount paid into the treasury, since the organization of the present board, is \$1000 63-100, and has been disbursed in payment of accounts against the College, as will appear by reference to the treasurer's account. The claims against the College at this time, amount to \$1800; and as it is probable some have not yet been presented, the debt of the College may be estimated at \$1850 or \$1900. No probable estimate can be made as to the amount that will be received from auction sales, up to the first of June next (at which time, the College ceases to receive that fund), as the amount for the quarter ending in January last, was \$448; while that ending in October last, was only \$104—and it may fall still lower."

COMMUNICATIONS.

If correspondents would recollect to prefix a title to their communications, however trifling or unimportant it may really appear to them, they would be doing us a peculiar favor. No doubt we have occasionally sadly disappointed the expectations of writers of well drawn up medical reports, by giving a caption quite at variance with the intention of the author. To misapprehension of the text, however, in all such cases, is to be imputed the cause of these offences. In constructing an index at the close of a volume, a name or term, expressive of the character of the case referred to, is essential; indeed, without such distinctive indications, a work intended for precedents and authority, as the recorded experience of our predecessors or cotemporaries, would present a perfectly chaotic mass of knowledge, from which no benefit could be derived, simply because the thing wanted could never be found without a tedious waste of time. These remarks have been elicited in consequence of having, in several instances, all our ingenuity called into requisition, to discover appropriate titles to valuable manuscripts, whose insertion could not well be dispensed with, even should they appear without cognominal distinctions.

Gonorrhœa in the Female.—Creosote has been administered by Dr. Elliotson, of London, in a great variety of diseases. He has lately given

it a trial in a case of gonorrhœa in a female, of many months duration. The dose was gradually increased to eight minims every four hours, accompanied with a warm bath every day, but without any apparent benefit. Turpentine has had considerable reputation in this disease after the inflammatory state is over, and it was thought that creosote, being analogous in many of its properties, might also be serviceable. Dr. E. says he is not satisfied that internal remedies are of the least use either in leucorrhœa or gonorrhœa, excepting to overcome an inflammatory state or to strengthen the body. He has not seen gonorrhœa itself controlled by any tonics, astringents, or specifics, given internally. He has, however, used the nitrate of silver, locally, where there is no inflammation. He has generally begun its administration with a quarter of a grain to an ounce of water. Another London physician, Dr. Jewell, considers this solution too weak. He begins with three or four grains to the ounce, and has in one case increased it to seventeen grains. In the inflammatory stage of gonorrhœa, very low diet and rest are necessary, with such antiphlogistic measures as the symptoms require. Walking about, and especially up and down stairs, Dr. E. considers most injurious. Cubebs will often arrest the disease at once, if given within the first forty-eight hours, but after that time it has comparatively little power. After the inflammatory symptoms have subsided, copaiba has very great power over the disease; but neither this, nor turpentine and creosote, should be given till after the inflammatory symptoms.

Medical Miscellany.—Several new medical publications are in progress at New York, Philadelphia, and Boston—chiefly compilations.—Quackery is exceedingly rife in this section of the country just at this time. A stranger would suppose, by reading the advertising columns of some of the papers, that New England was exclusively peopled by the lame, the halt, and the blind.—A man in Chesterfield, Ms. a short time since, it is said, retired to bed with a thick head of hair, which fell off so completely in the course of the night, that he was perfectly bald the next morning.—There has been an unusual degree of suffering the present winter, in consequence of frost-bitten limbs.—Prof. Silliman will commence a popular course of lectures on Chemistry, at the Odeon, in this city, about the middle of March.—Has any professional gentleman knowledge of a mineral preparation for filling hollow teeth, which can be introduced in a liquid form, and speedily become hard?—Two specimens of that rare animal—*ornotherium paradoxus*, a quadruped with a bill like a duck—have been received recently by the Boston Society of Natural History, from New Holland.—Dr. Paige has lectured, of late, in his usual successful manner, on acoustics. His illustrations of ventriloquism are inimitably fine.—Dr. Lewis, of this city, has an excellent practical school of human and comparative anatomy.—Four physicians of Beverly, have published a fee-bill. Amongst the charges, it is written—"an obstetric case, and necessary attendance for a week—\$5." "For an ordinary visit, one mile from the Old S. M. House, 50 cents." Surely, no man can afford to maintain a horse in Massachusetts, and practise physic for such compensation.—A very great Q—has threatened a city editor with a prosecution for a libel.—What has become of the United States Medical and Surgical Journal? The February No. is still due.—A new board of visitors has been appointed, by the governor, for the State Lunatic Hospital.—Syringes, of all kinds, are manufactured by Messrs.

Brewer & Brothers, in a most beautiful manner, far superior to the foreign article.—The gum-elastic ear-trumpets, having a long flexible tube, have been ascertained to be almost an useless article. Their construction is unphilosophical, and wholly at variance with the known laws of acoustics.

Boylston Medical Society.—The following officers of the Society have been chosen for the ensuing year—Dr. Henry I. Bowditch, President. Dr. Jonathan M. Warren, Vice President. Mr. Joseph Sargent, Secretary. Mr. Benjamin H. West, Treasurer. The Society's premiums have been awarded this season, the first to Mr. Luther Clark, for a Dissertation on "Theorizing in Medicine;" the second to Mr. Samuel C. Foster, for a Dissertation on "Creosote."

To CORRESPONDENTS.—"Medical Ethics" is received, and will appear in an early number.

DIED—At Eutaw, Charles Co. Md. Dr. George W. Steuart, aged 24.

Whole number of deaths in Boston for the week ending Feb. 27, 18. Males, 8—Females, 10. Of inflammation of the lungs, 1—suicide, 1—consumption, 3—old age, 1—intemperance, 1—aneurism of the aorta, 1—typhous fever, 1—apoplexy, 1—smallpox, 1—paralytic, 1—dropsy on the brain, 1—croup, 1—child-bed, 1—burn, 2—lung fever, 1. Stillborn, 7.

A GOOD STAND FOR A PHYSICIAN AND SURGEON.

A PHYSICIAN in the eastern part of Massachusetts (wishing to remove from the State), would dispose of his place on the most reasonable terms. A very eligible location for a young gentleman. For particulars, inquire of the editor of this Journal; if by mail, post-paid. eptf.

DR. JOHN S. BARTLETT has removed to No. 11 Atkinson Street, a few doors below his former residence, on the opposite side. The office is that formerly occupied by the late Dr. S. H. SMITH, and more recently by Dr. Woods. March 2.

SCHOOL OF MEDICINE, AT WOODSTOCK, VERMONT,

CONNECTED WITH MIDDLEBURY COLLEGE.

(Incorporated by the Legislature of Vermont, October, 1835, with the power of conferring Degrees.)

The Annual Course of Lectures, at this Institution, will commence on the second Thursday (10th day) of March next, and continue thirteen weeks.

Theory and Practice of Medicine and Obstetrics, by H. H. CHILDS, M.D.

Physiology and Surgery, by WILLARD PARKER, M.D.

Chemistry and Materia Medica, by DAVID PALMER, M.D.

Anatomy, by ROBERT WATTS, JR. M.D.

Medical Jurisprudence, by NORMAN WILLIAMS, A.M.

Demonstrations in Anatomy, by OTIS PERHAM.

The usual number of Lectures will be *free*, daily—besides the Demonstrations in Anatomy and occasional evening examinations. Considerable additions are now making to the Chemical Apparatus; and opportunities will be furnished to students for practical Anatomy, arrangements for that purpose having been made last year in the city of New York. *No subject for dissection will be received from any person, or on any terms.*

Fees for the course—\$45. Graduation—\$18. For those who have attended two courses, but do not graduate—\$10. All the above expenses to be paid in advance, or secured by note, with a satisfactory endorser, to DAVID PIERCE, Esq. Treasurer of the Institution. Board is usually furnished at from \$1.50 to \$2.00 per week, including room, wood, lights, and washing.

Students are requested to come provided with two or more standard works on each of the above designated branches of study. The term will commence with Lectures on Anatomy, Chemistry, Physiology, Surgery and Materia Medica. Degrees will be conferred at the close of the Lecture Term.

Examinations will be conducted by the Medical Faculty, in presence of a delegation from the College, and a Committee appointed by the Justices of the Supreme Court, pursuant to the provisions of the act of incorporation. Requisites to an examination are, that the student produce satisfactory testimonials of moral character, and of his having studied three years with a regular practitioner; that he shall have attended two courses of public Lectures, one of which must have been at this institution; and that he shall have attained the age of 21 years.

By order of the Board of Trustees,
E. HUTCHINSON, Secretary.

THE BOSTON MEDICAL AND SURGICAL JOURNAL is published every Wednesday, by D. CLAPP, JR. at 184 Washington Street, corner of Franklin Street, to whom all communications must be addressed, *post-paid*. J. V. C. SMITH, M.D. Editor. It is also published in Monthly Parts, on the 1st of every month, each Part containing the weekly numbers of the preceding month, stitched in a cover.—Price \$3.00 a year in advance, \$3.50 after three months, and \$4.00 if not paid within the year.—Every seventh copy, *gratis*.—Postage the same as for a newspaper.